



*Better health and sustainable healthcare for Bristol*

# Overtime Policy

## Overtime Policy

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<b>Date Approved</b>	June 2014
<b>Approved by</b>	Quality and Assurance Group
<b>Date of next review</b>	June 2017
<b>How is policy to be disseminated</b>	All staff

Check list for Governing Body/approving committee	
Has an Equality Impact Assessment been completed?	Yes
Has legal advice been sought?	No
Have training issues been addressed?	Yes
Are there financial issues and have they been addressed	Yes
How will implementation be monitored	Through the SWCSU HR Team
How will the policy be shared with: <ul style="list-style-type: none"> <li>• Staff</li> <li>• Patients</li> <li>• Public</li> </ul>	Via the Bristol CCG internet site and dedicated communication to Bristol CCG employees.
Are there linked policies and procedures	

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## **1 Policy Statement**

This guidance sets out the arrangements for overtime payment under the Agenda for Change terms and conditions of employment.

This policy describes the good practice which should be followed when staff may be asked to work overtime and how they will be recompensed for it.

This policy was written with the following principles in mind:

- Bristol Clinical Commissioning Group is committed to helping staff balance the demands of home and work responsibilities and promoting a healthy work-life balance for all staff.
- Where possible, managers should plan in advance the most effective way of covering extra work demands or a shortage of staff in order to run their service.
- There should be equality between all staff groups

## **2 Eligibility for Overtime**

Eligibility for overtime payments is set out in Section 3 of the Agenda for Change terms and conditions.

## **3 Good Practice**

Managers must bear in mind the limits on working hours laid down in the Working Time Regulations, when asking staff to work overtime, especially the requirement not to exceed an average of 48 hours per week and the need for minimum daily rest periods. See Section 27: Working Time Regulations, in the NHS Terms and Conditions of Service Handbook and the Working Time Policy and Procedure for further guidance.

Managers should plan to cover any known absence as far in advance as possible in order to minimise the need for overtime working.

Agreed overtime may also be worked if additional hours are required to complete urgent work or provide urgent service cover.

If staff are offered the opportunity to work overtime or extra shifts, they do have the option to turn this offer down without this having a negative impact on them.

Paid overtime should only be agreed when all other options have been considered and rejected.

## **4 Definition of Overtime**

Overtime is defined as hours, in excess of the contracted hours, which have been worked with the prior agreement of the employee's line manager to meet particular circumstances. If an employee is working extra hours under a separate contract for Bristol CCG, this is not defined as overtime.

## **5 Overtime Payments**

There is a single harmonised rate of time and a half for all overtime, with the exception of work on general public holidays, which will be paid at double time.

Overtime payments will be based on the hourly rate provided by basic pay.

Part-time employees will receive payments for the additional hours at plain time rates until their hours exceed the standard hours of 37.5 hours a week.

The single overtime rate will apply whenever excess hours are worked over full-time hours unless time off in lieu is taken, provided the employee's line manager has agreed previously with the employee to this work being performed outside the standard hours.

Staff may request to take time off in lieu as an alternative to overtime payments. However, staff who are unable to take time off in lieu within three months for operational reasons, must be paid at the overtime rate.

Time off in lieu instead of overtime payments will be at usual time rates.

Senior staff paid on Agenda for Change pay bands 8 or 9 will not be entitled to overtime payments or time off in lieu for any reason other than as a result of being called into work during an on-call period (Please refer to paragraph 2.25 in the NHS Terms and Conditions of Service Handbook).

## **6 Process for seeking approval to undertake overtime**

In exceptional circumstances where overtime is required to be undertaken it will need to be approved by a Director prior to the overtime being undertaken. The reason for overtime needing to be approved must be justified in writing to the Director. The Director's decision is final.

Following overtime being approved and the individual (band 1 – 7) undertaking the overtime, the hours will need to be claimed via a change of conditions forms. The form will need to be submitted to the payroll mailbox and will be paid in the following months' salary.

## **7 How Should Overtime be Allocated?**

Managers must ensure that all eligible staff are given an equal opportunity to work any available overtime.

## **8 Statement of Compliance with the Equality Act 2010**

All relevant persons are required to comply with this document and must demonstrate sensitivity and competence in relation to the nine protected characteristics as defined by the Equality Act 2010. The Act prohibits discrimination on the basis of age, disability, gender reassignment, marriage/civil partnership, pregnancy/maternity, race, religion/belief, sex or sexual orientation. It also means that each manager or member of staff involved in implementing the policy must have due regard to the need to: eliminate unlawful discrimination, harassment, victimisation; advance equality of opportunity between those who share a protected characteristic and those who do not; and foster good relations between people who share a protected characteristic and those who do not.

If you, or any other groups, believe you are disadvantaged by anything contained in this document please contact the Document Lead (author) who will then actively respond to the enquiry

## **9 Counter Fraud**

The CCG is committed to the NHS Protect Counter Fraud Policy – to reduce fraud in the NHS to a minimum, keep it at that level and put funds stolen by fraud back into patient care. Therefore, consideration has been given to the inclusion of guidance with regard to the potential for fraud and corruption to occur and what action should be taken in such circumstances during the development of this procedural document.

## **10 Review**

This policy and procedure will be reviewed after 3 years or earlier at the request of either the staff or management side of the recognised consultative forum.

**Jude Champion**  
**Senior HR Business Partner**

May 2014